

Fayette County Health Department

140 Stonewall Avenue West ♦ Suite 105 ♦ Fayetteville, Georgia 30214
Phone (770) 460-5730 Ext 5415 ♦ Fax (770) 461-7907

Existing Systems Evaluation

No Refunds

Allow 3 working days for septic evaluations and 10 working days for well evaluations. Water samples cannot be collected on Fridays or on a day before a holiday.

An additional \$10.00 will be charged on water needing to be retested.

Type of Evaluation:

_____ Septic \$75

_____ Well \$60

_____ Both \$90

Reason for water testing:

Own Interest _____

Requirement from _____

Lending Firm _____

Today's Date: _____

Date Needed: _____

(Do Not Use ASAP, etc.)

Desire results to be mailed?

_____ Yes _____ No

Current owner: _____ Home Tel: _____ Work Tel: _____

Subdivision _____ Lot Number _____

Address: _____ Year Constructed _____

(Address of lot to be evaluated)

Do you have any dogs our personnel must be concerned about? _____ Yes _____ No

Has tank been pumped or installed in the past 5 years? _____ Yes _____ No, if yes attach documentation. If no tank **must be serviced before evaluation can be approved.**

Well Information

Type of well: Bored _____ Drilled _____ Spring _____

Is there a 4 inch thick, concrete pad that extends out at least 2 feet in all directions from the casing of the well _____ yes _____ No _____

Is the casing height 12" above the ground? _____ Yes _____ No Year Constructed _____

Has the well been treated with chlorine within the past year? _____ Yes _____ No, if yes when _____

Location of well: _____

For Office use only

Payment received _____

Receipt issued _____

Results reported to: _____

Date: _____

By: _____